



ILLINOIS COMMERCE COMMISSION - PUBLIC UTILITY FUND
ANNUAL GROSS REVENUE RETURN
Period 01/01/99 Through 12/31/99

READ INSTRUCTIONS ON REVERSE SIDE - Typewriter Or Ink Only

Officer or other person to whom questions concerning this return should be addressed Name: Erin K. Marshall Tel: (785) 832-2121 Fax: (785) 832-8226
Street Address: 1915 W. 24th St., PO Box 3250
City: Lawrence State: KS Zip: 66046

Name and Address of In-State Designated Agent

ST. ANDREWS TELECOMMUNICATIONS, L.L.C.
1915 W. 24th St.
Lawrence, KS 66046-3932

FEIN: 000000868

Co. Type: P1
Phone #: () -

☒ CHECK HERE IF THIS IS AN ADDRESS CHANGE

FEIN or Social Security # 48-1178706

1. a. ACTUAL Illinois Gross Operating Revenue for the Calendar Year ending December 31 1999 \$ 2,952.81
Based on: ☐ Receipts ☒ Billing
b. Less revenue from Illinois-related interstate service \$ 2,278.75
c. Gross Revenue applicable to Illinois \$ 674.06
2. Deduct:
a. Revenue from sale to utilities or electric coops for resale \$ 0
b. Uncollectible accounts (if billing basis used) \$ 0
c. Other deductions (must be itemized, attach schedule, see instruction) \$ 0
d. TOTAL DEDUCTIONS \$ 0
3. Gross Revenue Subject to tax (Line 1c minus Line 2d) \$ 674.06
4. Tax Payable for the Calendar Year ending December 31, 1999 (Line 3 x .001) \$.67
5. Deduct:
a. Credit memorandum attached, No. \$
b. Total credit memorandums submitted with previously filed 1999 returns, if any \$
c. Total payments made with previously filed 1999 returns, if any \$
d. TOTAL CREDITS AND PAYMENTS \$ 0
6. Tax unpaid or (overpaid) (Line 4 minus Line 5d) \$.67
7. Payment enclosed \$ 0
8. Account Balance (Line 6 minus Line 7) \$ 0

OATH: Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct and complete.

Officer's Signature

Erin K. Marshall

Please Print or Type Officer's Name & Title Erin K. Marshall, Director of Operations

IMPORTANT

The term Public Utility and Utility as used on this form includes Telecommunications Carriers as under the Public Utilities Act.

To avoid penalties, the original of this RETURN, together with remittance, must be filed with the Fiscal Information Section at the ILLINOIS COMMERCE COMMISSION, 527 East Capitol Avenue, P. O. Box 19280, Springfield, Illinois 62794-9280 on or before the **31ST DAY OF JANUARY** FOLLOWING THE END OF THE APPLICABLE YEAR.

Make Check, Draft or Money Order payable to: ILLINOIS COMMERCE COMMISSION - PUBLIC UTILITY FUND

This agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under the Public Utilities Act (220 ILCS 5/2-202). Disclosure of this information is MANDATORY. Failure to provide any information could result in substantial penalties. This form has been approved by Forms Management Center.

AGENCY USE ONLY

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